

City of Troy

Stormwater ERU Credit Application

Applicant:

Facility Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____

Title: _____

Phone: _____ Fax: _____

Email: _____

Account Number: _____

Site Information

Facility address (if different): _____

City: _____ State: _____ Zip: _____

Impervious Area: _____ ERUs: _____

Attachments (check all that are included):

- | | |
|-------|---|
| _____ | Impervious delineation with labels (buildings, driveways, etc.) |
| _____ | Size and location of all stormwater structures |
| _____ | Hydrologic calculations for undeveloped and developed land |
| _____ | Drainage area map, including off-site areas draining through the site |
| _____ | Maintenance Management Plan |
| _____ | Maintenance schedule of operations that affect the efficiency of the structural control including mowing, sediment removal, cleaning, planting, monitoring, watering, and channel restoration |
| _____ | Maintenance Agreements |
| _____ | NPDES Permit |

Applicant should show activities that are completed that are to improve the post construction stormwater quality or reduce permanent runoff control. This could include identifying forested and grass buffer strips, infiltration trenches, bio-retention area, or other areas that are for the express purpose of stormwater treatment or water quality Improvement.

CERTIFICATION:

I hereby request consideration for a Stormwater ERU Credit. I certify that I have authority to make such a request and authorization for this property. I further certify that the above information is true and correct to the best of my knowledge.

Name (please print)

Title

Signature

Date

Submit complete application and all data to:

Deborah J. Swan, P.E., City Engineer
Engineering Division
City of Troy
100 S. Market Street
Troy, Ohio 45373
Phone: 937-339-2641
Fax: 937-440-9423
Email: deborah.swan@troyohio.gov
www.troyohio.gov